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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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TLR
5/20/03

APPLICANT:	DAVID A. SCOTT ET AL)
SERIAL NO.:	09/894,498) ART UNIT 2645
FILED:	June 28, 2001) EXAMINER: Gauthier, Gerald
FOR:	SYSTEM AND METHOD FOR ELECTRONIC MESSAGE STATUS NOTIFICATION AND REPLY USING VARIOUS ELECTRONIC MEDIA)

I hereby certify that this correspondence is being transmitted to the United States Patent & Trademark Office via facsimile to facsimile number 703-872-9314 on May 21, 2003.

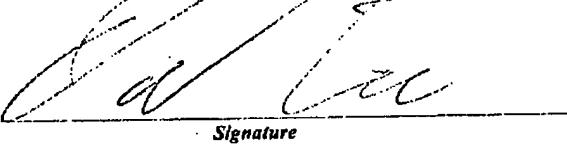
Sheila Smedick
Sheila Smedick 5-21-03
signature date

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

In response to the Office Action mailed on March 17, 2003, Applicant requests reconsideration in view of the following amendments and remarks.

BS01045
BLL-0054

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 01045 (BLL-0054)	
Applicant(s): DAVID A. SCOTT ET AL		Serial No. 09/894,498		Filing Date June 28, 2001	
Examiner Gerald Gauthier		Group Art Unit 2645			
Invention: SYSTEM AND METHOD FOR ELECTRONIC MESSAGE STATUS NOTIFICATION AND REPLY USING VARIOUS ELECTRONIC MEDIA					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	60 -	66 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 06-1130</p> <p><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input type="checkbox"/> Any patent-application processing fees under 37 CFR 1.17.</p>					
 Signature					
Dated: May 21, 2003					
<p>David A. Fox Registration No. 38,807 CANTOR COLBURN LLP 55 Griffin Road South Bloomfield, CT 06002 Telephone (860) 286-2929 Facsimile (860) 286-0115 Customer No. 36192</p>					
<p>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p>					
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